

**INDUSTRIAL WASTEWATER DISCHARGE PERMIT APPLICATION**

**Section I**

**Applicant and Facility Description**

Please fill all items are to be filled out completely. If an item is not applicable, indicate by noting "NA".

1. Name of Facility \_\_\_\_\_  
\_\_\_\_\_

2. Mailing Address \_\_\_\_\_  
\_\_\_\_\_

3. Address of Premises \_\_\_\_\_  
\_\_\_\_\_

4. Chief Executive Officer  
\_\_\_\_\_  
Name Title

5. Authorized individual to contact in case of emergency (i.e., spill, fire, process upset, etc.) or for information pertaining to this application. Also list backup contact.  
\_\_\_\_\_  
Name Backup contact, Name  
\_\_\_\_\_  
Title Title

\_\_\_\_\_  
Facility Phone Number \_\_\_\_\_  
\_\_\_\_\_  
Home Phone Number \_\_\_\_\_

6. "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violation."

\_\_\_\_\_  
Printed Name of Signing Official Title

\_\_\_\_\_  
Signature of Signing Official Date

**Section II**

**Plant Operations**

1. Provide a **detailed** description of manufacturing processes, facilities or service activities provided on the premises, **specifically those processes which involve process wastewater or hazardous materials**. Use additional sheets if necessary:

Is there a wastewater generating process that would involve confidential information? \_\_\_\_\_

2. Principal raw materials used:
  
  
  
  
  
  
  
  
  
  
3. Chemicals and compounds used (Refer to Table I):
  
  
  
  
  
  
  
  
  
  
4. Solvents used:
  
  
  
  
  
  
  
  
  
  
5. Describe storage practices for the chemicals and solvents listed above:

6. List all products manufactured or services provided by your facility along with the corresponding SIC (Standard Industrial Code) number or NAICS number.

PRODUCT OR SERVICE	SIC/NAICS CODE
_____	_____
_____	_____
_____	_____
_____	_____

7. If this facility is subject to Federal Categorical Pretreatment standards, as per 40 CFR 403, what is the categorical classification(s)? \_\_\_\_\_

What is the Federal Categorical Compliance Date? \_\_\_\_\_

8. Has a baseline report been submitted? \_\_\_\_\_

9. Shift Information

- a. Shifts normally worked:

	Sun	Mon	Tue	Wed	Thur	Fri	Sat
1st	_____	_____	_____	_____	_____	_____	_____
2nd	_____	_____	_____	_____	_____	_____	_____
3rd	_____	_____	_____	_____	_____	_____	_____

- b. Average # of employees/shift:

1st \_\_\_\_\_

2nd \_\_\_\_\_

3rd \_\_\_\_\_

- c. Shift start and end times:

1st \_\_\_\_\_

2nd \_\_\_\_\_

3rd \_\_\_\_\_

10. Describe any routine or intermittent cleaning of equipment and facility. Include volumes of water used and type of cleaning chemicals used and how the cleaning water is discharged. Include a list of any automatically metered cleaning chemicals.

## **TABLE I**

### **PRIORITY POLLUTANTS**

If you use, or dispose of, any of the items on the following two pages, mark them by the following methods:

1. (U) = ITEM IS USED AT THIS LOCATION.
2. (DT) = DISPOSED OF, AFTER TREATMENT, TO THE SANITARY SEWER SYSTEM.
3. (DW) = DISPOSED OF, WITHOUT TREATMENT, TO THE SANITARY SEWER SYSTEM.
4. (DO) = DISPOSED OF, OFF SITE, AFTER BEING USED AND/OR GENERATED, SUCH AS SLUDGE, LIQUID, ETC.
5. (TU) = ITEM IS TOTALLY USED IN PRODUCTION, THEREFORE NO WASTE PRODUCT IS LEFT.
6. (VU) = ITEM IS VAPORIZED IN USE, AND THEREFORE NO WASTE PRODUCT IS LEFT.

An item may have several different markings after it, depending on the use, treatment and disposal of each by your company.

**PRIORITY POLLUTANTS**  
**VOLATILE COMPOUNDS**

002	ACROLEIN	088	VINYL CHLORIDE
004	BENZENE	003	ACRYLONITRILE
006	CARBON TETRACHLORIDE	047	BROMOFORM
051	CHLORODIBROMOMETHANE	007	CHLOROBENZENE
019	2-CHLOROETHYL VINYL ETHER	016	CHLOROETHANE
048	DICHLOROBROMOMETHANE	023	CHLOROFORM
010	1,2-DICHLOROETHANE	013	1,1-DICHLOROETHANE
032	1,2-DICHLOROPROPANE	029	1,1-DICHLOROETHYLENE
038	ETHYLBENZENE	033	1,3-DICHLOROPROPYLENE
045	METHYL CHLORIDE	046	METHYL BROMIDE
015	1,1,2,2-TETRACHLOROETHANE	044	METHYLENE CHLORIDE
086	TOLUENE	085	TETRACHLOROETHYLENE
011	1,1,1-TRICHLOROETHANE	030	1,2-TRANS-DICHLOROETHYLENE
087	TRICHLOROETHYLENE	014	1,1,2-TRICHLOROETHANE

**ACID COMPOUNDS**

024	CHLOROPHENOL	031	2,4-DICHLOROPHENOL
034	2,4-DIMETHYLPHENOL	060	4,6-DINITRO-O-CRESOL
059	2,4-DINITROPHENOL	057	2-NITROPHENOL
058	4-NITROPHENOL	022	P-CHLORO-M-CRESOL
064	PENTACHLOROPHENOL	065	PHENOL
021	2,4,6-TRICHLOROPHENOL		

**BASE/NEUTRAL COMPOUNDS**

001	ACENAPHTHENE	077	ACENAPHTHYLENE
078	ANTHRACENE	005	BENZIDINE
072	BENZO(A)ANTHRACENE	073	BENZO(A)PYRENE
074	BENZO(B)FLUORANTHENE	079	BENZO(ghi)PERYLENE
075	BENZO(K)FLUORANTHENE	043	BIS(2-CHLOROETHOXY)METHANE
018	BIS(2-CHLOROETHYL)ETHER	042	BIS(2-CHLOROISOPROPYL)ETHER
017	BIS(CHLOROMETHYL)ETHER	041	4-BROMOPHENYL PHENYL ETHER
066	BIS(2-ETHYLHEXYL)PHTHALATE	020	2-CHLORONAPHTHALENE
067	BUTYL BENZYL PHTHALATE	076	CHRYSENE
025	1,2-DICHLOROENZENE	040	4-CHLOROPHENYL PHENYL ETHER
082	DIBENZO(A,H)ANTHRACENE	027	1,4-DICHLOROENZENE
026	1,3-DICHLOROENZENE	070	DIETHYL PHTHALATE
028	3,3-DICHLOROENZIDINE	068	DI-n-BUTYL PHTHALATE
071	DIMETHYL PHTHALATE	036	2,6-DINITROTOLUENE
035	2,4-DINITROTOLUENE	081	PHENANTHRENE
069	DI-N-OCTYL PHTHALATE	009	HEXACHLOROENZENE
039	FLUORANTHENE	053	HEXACHLOROCYCLOPENTADIEN
080	FLUORENE	083	INDENO(1,2,3-cd)PYRENE
052	HEXACHLOROENADIENE	055	NAPHTHALENE
012	HEXACHLOROETHANE	061	N-NITROSODIMETHYLAMINE
054	ISOPHORONE	062	N-NITROSODIPHENYLAMINE
056	NITROENZENE	084	PYRENE
008	1,2,4-TRICHLOROENZENE	063	N-NITROSODI-n-PROPYLAMINE
037	1,2-DIPHENYLHYDRAZINE (AS AZOENZENE)		

**PESTICIDES AND PCB'S**

089	ALDRIN	104	GAMMA-BHC
102	ALPHA-BHC	105	DELTA-BHC
103	BETA-BHC	091	CHLORDANE
092	4,4'-DDT	093	4,4'-DDE
094	4,4'-DDD	090	DIELDRIN
095	ALPHA-ENDOSULFAN	096	BETA-ENDOSULFAN
097	ENDOSULFAN SULFATE	098	ENDRIN
099	ENDRIN ALDEHYDE	113	TOXAPHENE
106	PCB-1242	109	PCB-1232
107	PCB-1254	111	PCB-1260
100	HEPTACHLOR	101	HEPTACHLOR EPOXIDE

#### METALS AND CYANIDE

114	ANTIMONY	115	ARSENIC
117	BERYLLIUM	118	CADMIUM
119	CHROMIUM	120	COPPER
122	LEAD	123	MERCURY
124	NICKEL	125	SELENIUM
126	SILVER	127	THALLIUM
128	ZINC	121	CYANIDE

#### MISCELLANEOUS

129	2,3,7,8-TETRACHLORODIBENZO-p-DIOXIN (TCDD)
116	ASBESTOS

## TABLE 1 (ADDITIONAL ITEMS)

### OTHER POLLUTANTS

Any Acids, Oils, Caustics, Fats, Grease or any other Chemicals NOT LISTED on the previous two pages that you Use, Generate, or Dispose of at this location. List these below and mark them according to the instruction page, titled Table 1.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_

**Section III**

**Water Usage and Discharge Information**

**Note: there should be a general balance the volume of water in the intake lines and the volume in the discharge lines.**

1. List **intake** water sources and volumes:

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
Municipal Water System	_____ gallons/day	_____ / _____
Private Well	_____ gallons/day	_____ / _____
Surface Water	_____ gallons/day	_____ / _____
Other	_____ gallons/day	_____ / _____

2. List average volume of **discharge** or water:

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
City Sewer System	_____ gallons/day	_____ / _____
Natural Outlet (NPDES)	_____ gallons/day	_____ / _____
Water Hauler	_____ gallons/day	_____ / _____
Evaporation	_____ gallons/day	_____ / _____
Contained in Product	_____ gallons/day	_____ / _____
Other (Specify)	_____ gallons/day	_____ / _____



3. Break down the water **discharged** to the sewer system into the following categories: these volumes should generally balance with the volumes in Section 2, above.

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
<u>Process Wastestream #1</u>	_____ gallons/day	_____ / _____

What do you call this process?

Describe this process:

What chemical are used in this process?

<u>Source</u>	<u>Volume</u>	(Check One) <u>Estimated/Measured</u>
<u>Process Wastestream #2</u>	_____ gallons/day	_____ / _____

What do you call this process?

Describe this process:

What chemical are used in this process?

<u>Process Wastestream #3</u>	_____ gallons/day	_____ / _____
-------------------------------	-------------------	---------------

What do you call this process?

Describe this process:

What chemical are used in this process?



5. **IMPORTANT:** Provide a schematic of the plant flow showing process from #3, floor drains, sanitary, cooling stream, etc., and their point of entry into the sewer system. Indicate on the schematic where chemicals are added and where you collect effluent samples, and location of pretreatment facility.

6. Do you have automatic sampling equipment or continuous wastewater flow metering equipment currently in use or included in future plans?

Current:	Flow Metering	_____	yes	_____	no
	Sampling Equipment	_____	yes	_____	no
Planned:	Flow Metering	_____	yes	_____	no
	Sampling Equipment	_____	yes	_____	no

**Section IV**  
**Wastewater Information**

If your facility performs processes in any of the industrial business activities listed below and any of these processes generate wastewater or waste sludge, place a check beside the category or business activity. Check all that apply:

- |     |                          |                                      |     |                          |   |
|-----|--------------------------|--------------------------------------|-----|--------------------------|---|
| 1.  | <input type="checkbox"/> | Adhesives                            | 31. | <input type="checkbox"/> | Metal finishing                                 |
| 2.  | <input type="checkbox"/> | Aluminum Forming                     | 32. | <input type="checkbox"/> | Mineral Mining and Processing                   |
| 3.  | <input type="checkbox"/> | Asbestos Manufacturing               | 33. | <input type="checkbox"/> | Nonferrous Metals Manufacture                   |
| 4.  | <input type="checkbox"/> | Auto & other Laundries               | 34. | <input type="checkbox"/> | Nonferrous Metals, Forming                      |
| 5.  | <input type="checkbox"/> | Battery Manufacturing                | 35. | <input type="checkbox"/> | Ore Mining and Dressing                         |
| 6.  | <input type="checkbox"/> | Builder's Paper and Board Mills      | 36. | <input type="checkbox"/> | Organic Chemical, Plastic & Synthetic Fibers    |
| 7.  | <input type="checkbox"/> | Canmaking                            | 37. | <input type="checkbox"/> | Organic Chemical                                |
| 8.  | <input type="checkbox"/> | Carbon Black Manufacturing           | 38. | <input type="checkbox"/> | Paint & ink                                     |
| 9.  | <input type="checkbox"/> | Cement Manufacturing                 | 39. | <input type="checkbox"/> | Paving and Roofing Materials                    |
| 10. | <input type="checkbox"/> | Coal Mining                          | 40. | <input type="checkbox"/> | Pesticides, Formulating, Packaging, Repackaging |
| 11. | <input type="checkbox"/> | Coil Coating                         | 41. | <input type="checkbox"/> | Pesticides, Manufacturing                       |
| 12. | <input type="checkbox"/> | Copper Forming                       | 42. | <input type="checkbox"/> | Petroleum Refining                              |
| 13. | <input type="checkbox"/> | Dairy Products                       | 43. | <input type="checkbox"/> | Pharmaceuticals                                 |
| 14. | <input type="checkbox"/> | Electric & Electronic Components     | 44. | <input type="checkbox"/> | Phosphate Manufacturing                         |
| 15. | <input type="checkbox"/> | Electroplating                       | 45. | <input type="checkbox"/> | Photographic Supplies                           |
| 16. | <input type="checkbox"/> | Explosives Manufacturing             | 46. | <input type="checkbox"/> | Plastic Molding and Forming                     |
| 17. | <input type="checkbox"/> | Feedlots                             | 47. | <input type="checkbox"/> | Plastics Processing                             |
| 18. | <input type="checkbox"/> | Ferroalloy Manufacturing             | 48. | <input type="checkbox"/> | Porcelain Enameling                             |
| 19. | <input type="checkbox"/> | Fertilizer Manufacturing             | 49. | <input type="checkbox"/> | Printing & Publishing                           |
| 20. | <input type="checkbox"/> | Foundries, (metal molding & casting) | 50. | <input type="checkbox"/> | Pulp, Paper and Paperboard                      |
| 21. | <input type="checkbox"/> | Fruits and Vegetables Processing     | 51. | <input type="checkbox"/> | Rubber Manufacturing                            |
| 22. | <input type="checkbox"/> | Glass Manufacturing                  | 52. | <input type="checkbox"/> | Seafood Processing                              |
| 23. | <input type="checkbox"/> | Grain Mills                          | 53. | <input type="checkbox"/> | Soaps & Detergents                              |
| 24. | <input type="checkbox"/> | Gum & Wood Chemical                  | 54. | <input type="checkbox"/> | Steam Electric Power Generating                 |
| 25. | <input type="checkbox"/> | Hospitals                            | 55. | <input type="checkbox"/> | Sugar Processing                                |
| 26. | <input type="checkbox"/> | Inorganic Chemical                   | 56. | <input type="checkbox"/> | Textiles Mills                                  |
| 27. | <input type="checkbox"/> | Iron & Steel                         | 57. | <input type="checkbox"/> | Timber  |
| 28. | <input type="checkbox"/> | Leather Tanning & Finishing          | 58. | <input type="checkbox"/> | Waste Disposal, Treating, and/or Incinerating   |
| 29. | <input type="checkbox"/> | Meat Products                        |     |                          |   |
| 30. | <input type="checkbox"/> | Mechanical Products                  |     |                          |   |

**Section V**

**Pretreatment**

1. Describe any wastewater treatment equipment or processes in use:

Pretreatment devices or process used for treating wastewater or sludge. Check all that apply:

<input type="checkbox"/> Air Flotation	<input type="checkbox"/> Chlorination	<input type="checkbox"/> Flow Equalization
<input type="checkbox"/> Centrifuge	<input type="checkbox"/> Cyclone	<input type="checkbox"/> Grease or Oil Separation
<input type="checkbox"/> Chemical Precipitation	<input type="checkbox"/> Filtration	<input type="checkbox"/> Grease Trap
<input type="checkbox"/> Grit Removal	<input type="checkbox"/> Ozonation	<input type="checkbox"/> Sedimentation
<input type="checkbox"/> Ion Exchange	<input type="checkbox"/> Reverse Osmosis	<input type="checkbox"/> Septic Tank
<input type="checkbox"/> Sump	<input type="checkbox"/> Screen	<input type="checkbox"/> Solvent
<input type="checkbox"/> Neutralization, pH Correction		
<input type="checkbox"/> Biological Treatment, Type		
<input type="checkbox"/> Rainwater Diversion or Storage		
<input type="checkbox"/> Other Chemical Treatment,		
<input type="checkbox"/> Other physical Treatment,		
<input type="checkbox"/> Other,		
<input type="checkbox"/> No Pretreatment Provided		

2. Describe any process control testing that is used to monitor the pretreatment equipment and processes:

If any wastewater analyses have been performed on the wastewater discharge(s) from your facilities, attach a copy of the most recent data to this form. Be sure to include the date of the analysis, name of the laboratory performing the analysis, and the location(s) from which sample(s) were taken.

3. Describe any additional pretreatment facilities and/or processes under consideration. Include a specific time schedule for completion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Do you dispose of any chemicals, solvents, sludges, or hazardous materials as a result of your processes?  
\_\_\_\_\_ yes \_\_\_\_\_ no

If so, provide a description of each material, giving the composition, annual quantity, and means of disposal.

5. If a private hauler is used to haul sludges/residuals, provide name and EPA Identification Number.

6. Where is the ultimate disposal site for sludges/residuals?

7. Do you have copies of manifests for waste hauled off site?  
\_\_\_\_\_ yes \_\_\_\_\_ no

8. Do you have a spill prevention, control, and countermeasure plan for your facility?

\_\_\_\_\_ yes \_\_\_\_\_ no

9. Do you have a solvent management plan for your facility?

\_\_\_\_\_ yes \_\_\_\_\_ no

10. Are any process changes or expansions planned during the next five years?

\_\_\_\_\_ yes \_\_\_\_\_ no

If yes, attach a separate sheet to this form describing the nature of the planned changes or expansions.

**Section VI**  
**Other Wastes**

1. Are any liquid waste or sludges from this firm disposed of by means other than discharge to the sewer system?  
 yes       no

If "no", skip remainder of Section VI.  
If "yes", complete remaining items.

2. These wastes may best be described as:

	Estimated Gallons or Pounds/Year
<input type="checkbox"/> Acids and Alkalines	_____
<input type="checkbox"/> Heavy Metal Sludges	_____
<input type="checkbox"/> Inks/Dyes	_____
<input type="checkbox"/> Oil and/or grease	_____
<input type="checkbox"/> Organic Compounds	_____
<input type="checkbox"/> Paints	_____
<input type="checkbox"/> Pesticides	_____
<input type="checkbox"/> Plating Wastes	_____
<input type="checkbox"/> Pretreatment sludges	_____
<input type="checkbox"/> Solvents/Thinners	_____
<input type="checkbox"/> Other Hazardous Wastes, describe:	_____
	_____
<input type="checkbox"/> Other Wastes, (describe),	_____
	_____
	_____

3. For the above checked wastes, does your company practice:

- On-site storage  
 Off-site storage  
 On-site disposal  
 Off-site disposal

Briefly describe the method(s) of storage or disposal checked above.



## Section VII

### Wastewater Characteristics - New Permittees Only

1. Attach any sampling data pertaining to the facility discharge to the sewer system. Explain where and when the sampling was accomplished, what type of sample was taken (i.e., grab, composite), and how many were analyzed.
2. A full scan of pollutants believed to be present and contained in Table I will be required for new discharge permits unless exempted by the City. The sample must be a 24-hour composite taken during normal production activity and/or representing typical wastewater flows.
3. Describe the exact procedure used to collect the sample:

### **MAILING ADDRESS**

Please send completed application with all supporting attachments and enclosures to:

Eric Kennedy WWTP Manager  
100 Public Square  
Mount Pleasant, TN 38474

### Note:

The information contained on this permit application will be used as the basis for the Industrial User Discharge Permit. It is very important that this application be filled out as accurately as possible. Any individual who knowingly falsifies any information requested on this permit application may be subject to fines and penalties under the City's Pretreatment Ordinance, plus administrative fines by the POTW through the Enforcement Response Plan.